## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together wi... applicable fee(s), to: Mail Mail Stop ISSUL . &E Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

1933

220 Fifth Avenue 16TH Floor

Authorized Signature .--

Typed or printed name

7590

HOLTZ, HOLTZ, GOODMAN & CHICK PC

10/28/2010

Leonard Holtz

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE; and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence microulding the Patent, advance orders and notification of maintenance less will be mailed to the durent correspondence micropation of micropation of micropation of the patent maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Fransmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Feeds (Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (771) 273-2885, on the date indicated below.

1/21/11

Registration No.

22,974

| NEW YORK, NY 10001-7708  |   |   |  | B VILLANI   | //                      | 0/ 1                    | (Depositor's name)  |
|--|---|---|--|---|-------------------------|-------------------------|---|
|  |   |   | ſ  |   | 12                      | - Villami               | (Signature)   |
|  |   |   | į  | EFS 1/21/   | 11                      |                         | (Date)  |
| APPLICATION NO.  | PPLICATION NO. FILING DATE  |   | FIRST NAMED INVENTOR   |   | ATTORNEY DOCKET NO.     |                         | CONFIRMATION NO.  |
| 10/057,364   | 01/24/2002  |   | Fomoya Yoshida   |   | 02036/LH                |                         | 2010  |
| TITLE OF INVENTION<br>AND ADMINISTRATIO  | : ADMINISTRATION<br>N METHOD  | SYSTEM, ADMINIST  | RATION APPARATO  | JS. RELAY SERVE   | R, ADN                  | IINISTRATEĎ APPA        | RATUS   |
| APPLN, TYPE  | SMALL ENTITY  | ISSUE FEE DUE   | PUBLICATION FEE D  | UE PREV PAID ISSU   | h-FEE                   | TOTAL FEE(S) DUE        | DATI DUE  |
| nonprovisional   | NO  | \$1510  | \$300  | \$0   | \$0                     |                         | 01/28/2011  |
| EXAMINER   |   | ART UNIT  | CLASS-SUBCLASS   |   |                         |                         |   |
| J00, J0  | SHUA  | 2445  | 709-223000   |   |                         |                         |   |
| PLEASE NOTE: Unic<br>recordation as set forth<br>(A) NAME OF ASSIC<br>KONICA COR   | ndence address (or Charles) attached.  attain (or "Fee Address") or more recent) attached.  DRESIDENCE DATA sas an assignee is ident in 37 CFR 3 11 Comp.  NEE  RPORATION | nge of Carrespondence  Indication form  and, Use of a Customer  A. TO BE PRINTED ON  iffed below, no assigner  betton of this form is NO  | (1) the names of u or agents OR, attention (2) the name of a s registered attorney 2 registered patent listed, no name will listed, no name will the PATENI (printo data will appear on the T a substitute for filing (B) RESIDENCE: IC TOKYO, JAPAN   | ingle firm (having as a<br>or agent) and the nam<br>attorneys or agents. If<br>the printed.  r type) the patent. If an assign<br>an assignment.  ITY and STATE OR 6 | a members of up no name | entitled below, the de  | TZ, HOLTZ, DDMAN & CHICK, PC  Cument has been filed for  up entity   Government |
| ia. The following fee(s) are submitted:    State   Fee   Fee |   |   | <ul> <li>b. Payment of Fce(s): (Please first reapply any previously paid is stue fee shown above)</li> <li>☐ A check is enclosed</li> <li>☐ Payment by credit card. Form PTO 2038 is attached.</li> <li>☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number ()6-1378 (enc-lose an extra copy of this form).</li> </ul> |   |                         |                         |   |
| La Apolicant claims  | SMALE ENTITY state  | □ b. Applicant is no longer claiming SMALL ENTITY status, See 37 CFR 1.27(g)(2). If from anyone other than the applicant; a registered attorney or age:n1; or the assignee or other party it. |  |   |                         |                         |   |
| NOTE: The Issue Fee and interest as shown by the r   | Publication Fee (if requeered of the United Sta   | uired) will not be accepte<br>tes Patent and Trademark  | d from anyone other the<br>Office.   | an the applicant; a reg   | istered a               | ttorney or agent; or th | e assignee or other party i   |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

This collection of information is required by 37 CFR 1311. The information is required to obtain or retain a benefit by the public which is to including gathering, preparing an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing and unformating the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time port on equivers to the complete complete the form and/or acquired to the complete compl